



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

Canc: Sep 2006
IN REPLY REFER TO
BUMEDNOTE 1110
BUMED-M7
16 Nov 2005

BUMED NOTICE 1110

From: Chief, Bureau of Medicine and Surgery
To: All Medical Department Personnel

Subj: FY-06 GUIDANCE ON USE OF HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM (HPLRP) FOR RETENTION

Ref: (a) Title 10 USC, Section 2173 (NOTAL)
(b) ASD(HA) policy memo of 11 Jul 2005 (NOTAL)
(c) ASD(HA) policy memo of 26 Jun 2003 (NOTAL)
(d) OPNAVINST 5450.215B
(e) OPNAVINST 1110.1

Encl: (1) Sample Request for HPLRP Participation
(2) Sample First Endorsement of HPLRP Participation

1. Purpose. To announce the availability of loan repayments under the Health Professions Loan Repayment Program (HPLRP) to qualified health professionals currently on active duty for FY-06 and to provide information concerning eligibility and application procedures.

2. Cancellation. BUMEDNOTE 1110 of 1 February 2005.

3. Background. The HPLRP is an accession and retention incentive program within the Armed Forces Health Professions Scholarship Program (AFHPSP). The HPLRP is a means to assist eligible personnel in the repayment of qualified educational loans in exchange for an obligated period of active duty. Reference (a) established the HPLRP and designated responsibility for the program to the Secretaries of the various military departments. References (b) and (c) established DOD policy and guidance for the HPLRP. Reference (c) delineated the current maximum annual repayment amount for qualified loans. Per reference (d), responsibility for administering HPLRP within the Department of the Navy was delegated to the Surgeon General of the Navy/Chief, Bureau of Medicine and Surgery (hereinafter Chief, BUMED) or his designee. Per references (d) and (e), Chief, BUMED designated the Commander, Naval Medical Education and Training Command (NMETC) as the program manager for AFHPSP which includes HPLRP.

4. Definitions

a. Active Duty Health Professionals. Any regular or Reserve officer (USN/USNR) in the Medical Corps, Dental Corps, Nurse Corps, or Medical Service Corps.

b. Qualified Loans. Government or commercial loans for actual costs paid for tuition, reasonable educational expenses, and reasonable living expenses relating to the attainment of a degree in allopathic or osteopathic medicine, dentistry, or other health care profession.

5. Eligibility Requirements for FY-06 Active Duty HPLRP Applicants (Retention Incentive Program)

a. Must be a commissioned officer on active duty in the Medical Corps, Dental Corps, Nurse Corps, or Medical Service Corps. Within the Medical Service Corps, HPLRP in FY-06 will only be available to individuals in the Clinical Psychology, Podiatry, and Pharmacy specialties. Nurse Corps officers with 3-10 years of commissioned service will be considered for the retention incentive program.

b. Must possess a valid unrestricted license.

c. Must be able to practice without restriction in their profession or specialty and have no restrictions on their credentials in their profession or specialty.

d. Must have completed initial active duty obligation by 30 September 2006.

e. Must have an agreement to incur an active duty service obligation in exchange for loan repayment. This obligation is consecutive (additive) with multi-year special pays obligations.

f. Must meet all height, weight, and physical readiness requirements.

6. Ineligibility Factors for HPLRP Applicants

a. Must not be a current or former participant in the Armed Forces Health Professions Scholarship Program (AFHPSP) and/or Financial Assistance Program (FAP) having received the maximum 4 years of sponsorship for the health professions degree.

b. Must not be a graduate of the Uniformed Services University of the Health Sciences (USUHS).

c. Must not be subject to a court judgment/lien against the individual's property arising from a debt owed to the United States (to include federal student loans).

- d. Must not be in default or delinquent on any federal debt.
 - e. Must not be in a promotion non-select status.
 - f. Must not have a punitive discharge or any other adverse personnel or administrative action pending or in effect.
 - g. Must not have received 4 years of loan repayment under the program.
7. Repayment Amount and Active Duty Service Obligation (ADO). Each eligible individual selected for participation in HPLRP will be able to receive a loan repayment of up to a maximal amount of approximately \$30,651 per year. Funds used in the HPLRP are taxable income and income tax will be deducted prior to disbursement of funds to lending institutions. In exchange for receiving 1 year of loan repayment, the individual will sign a written agreement agreeing to a corresponding minimum 2-year ADO. Accepting 2 years of loan repayment will result in a 2-year ADO. Accepting 3 years of loan repayment will result in a 3-year ADO. Accepting 4 years of loan repayment will result in a 4-year ADO. The ADO for HPLRP must be served at the completion of any additional ADO incurred. No portion of the ADO for HPLRP will be fulfilled by prior active service.
8. Repayment Distribution within the Medical Department Corps. On a yearly basis, the Corps Chiefs will determine the number of new loan repayments to be awarded and the eligible specialties. Of note, those officers who have previously signed multi-year loan repayment contracts will not be affected by this process.
9. Application Procedures. A notice of intent to apply for HPLRP must be submitted to the Naval Medical Education and Training Command (NMETC) point of contact by 15 December 2005. Applications for HPLRP, enclosure (1), must be submitted to the Commander, Naval Medical Education and Training Command (Code OHB), 8901 Wisconsin Avenue, Bethesda, MD 20889-5611. Enclosure (1) is available in Word format on the Web at: <http://navymedicine.med.navy.mil/default.cfm?seltab=directives> under the Sample Format tab. All applications must be received by 6 January 2006. Applications received after that date will not be considered. Each application must contain the following:
- a. Request for HPLRP enrollment to include name, rank, corps, social security number, active duty status, years of service, business address, telephone number, facsimile (FAX) number, and e-mail address.
 - b. The following certification statement: "I certify that I have not incurred any prior or current active duty obligation resulting from the maximum 4 years of sponsorship by participation in the Armed Forces Health Professions Scholarship Program (AFHPSP) or Financial Assistance Program (FAP), or participation in the Uniformed Services University of the Health Sciences (USUHS)."

- c. Complete loan information and verification for each loan for which repayment assistance is requested to include total loan obligation.
- d. A completed certification of non-delinquent loan status.
- e. Copy of licensure and board certification/eligibility documents.
- f. Curriculum Vitae.
- g. Copy of Officer Summary Record.
- h. Copy of Performance Summary Record.
- i. Copies of last five or since commissioning (if less than 5 years) Fitness Reports.
- j. Commanding officer's endorsement, enclosure (2), is to include verification that no punitive or other adverse personnel or administrative action is pending or in effect, that (name of applicant) has no restrictions to practice in the field of their specialty, and that the individual meets height, weight, and physical readiness requirements. Enclosure (2) is available in Word format at: <http://navymedicine.med.navy.mil/default.cfm?seltab=directives> under the Sample Format tab.

10. Application Review Process and Selection Notification

- a. A duly appointed Administrative Selection Board will convene in January 2006 to review all applications and provide selection recommendation to the Chief, BUMED. The Chief, BUMED will make final approval of individuals for participation in HPLRP.
- b. As it is likely there will be many more requests for enrollment in HPLRP than available participation openings, the selection process will be very competitive. The Administrative Selection Board will be governed by a Chief, BUMED approved precept. The following criteria, while not encompassing all details of the precept, will be considered by the Administrative Selection Board in making approval recommendations:
 - (1) Individual assignments; including operational assignments (past and future).
 - (2) Individual accomplishments and awards.
 - (3) Potential for future naval service and leadership.

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c. NMETC will notify individuals of their selection or non-selection for enrollment in HPLRP by 1 February 2006. Selected individuals will receive a written agreement delineating the obligations of all parties under HPLRP by 15 February 2006. The original signed agreement must be returned to the Commander, Naval Medical Education and Training Command (Code OHB), 8901 Wisconsin Avenue, Bethesda, MD 20889-5611, FAX (301) 295-6014, by close of business 25 February 2006. NMETC will coordinate loan repayments with the appropriate lending institutions for those officers signing HPLRP contracts.

d. For questions concerning application procedures and/or eligibility requirements, contact NMETC Code OHB: LT Wilson, e-mail at rwilson@nmetc.med.navy.mil, commercial (301) 295-5567, DSN 295-5567, FAX (301) 295-6014.



D. C. ARTHUR

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SAMPLE REQUEST FOR HPLRP PARTICIPATION

Date:

From: (Individual)
To: Commander, Naval Medical Education and Training Command (Code OHB)
8901 Wisconsin Avenue, Bethesda, MD 20889-5611
Via: (Commanding Officer)

Subj: REQUEST FOR PARTICIPATION IN THE FY-06 HEALTH PROFESSIONS
LOAN REPAYMENT PROGRAM (HPLRP) FOR RETENTION

Ref: (a) BUMEDNOTE 1110 of (date of notice)

Encl: (1) Completed loan information and verification form for each loan for which
repayment assistance is requested to include total loan obligation
(2) Completed certification of non-delinquent status form
(3) Copy of licensure and board certification/eligibility documents
(4) Curriculum Vitae
(5) Copy of Officer Summary Record
(6) Copy of Performance Summary Record
(7) Copies of last five or since commissioning (if less than 5 years) Fitness
Reports

1. Request participation in the HPLRP for a period of (1, 2, 3, or 4) years. Per
reference (a), enclosures (1) through (7) are submitted.

2. I certify that I have not incurred any prior or current active duty obligation resulting
from the maximum four years of sponsorship by participation in the Armed Forces
Health Professions Scholarship Program (AFHPSP), Financial Assistance Program
(FAP), or Uniformed Services University of the Health Sciences (USUHS).

3. I understand that I must sign and return three originals of the HPLRP service
agreement (or addendum), as appropriate, if approved for participation in the HPLRP. I
also understand that funds used in the HPLRP are taxable income and income tax
withholding will be deducted prior to disbursement of funds to lending institutions. I can
be reached at DSN (number); commercial (number); FAX (number), and my e-mail
address is (address).

(Signature block)

Enclosure (1)

BUMEDNOTE 1110
16 Nov 2005

SAMPLE FIRST ENDORSEMENT OF HPLRP PARTICIPATION

1110
Ser/00
Date

FIRST ENDORSEMENT on (name, corps, SSN) ltr of (date)

From: (Commanding Officer)

To: Commander, Naval Medical Education and Training Command (Code OHB)
8901 Wisconsin Avenue, Bethesda, MD 20889-5611

Subj: REQUEST FOR PARTICIPATION IN THE FY-2006 HEALTH PROFESSIONS
LOAN REPAYMENT PROGRAM (HPLRP) FOR RETENTION

Ref: (a) BUMED Notice 1110 of (date of notice)

1. Forwarded recommending approval.
2. Per reference (a), I verify that no punitive or other adverse personnel or administrative action is pending or in effect and that (name of applicant) meets height, weight, and physical readiness requirements.
3. Additional comments.

(Signature block)

Copy to: (Individual)

Enclosure (2)